DEPARTMENT OF HUMAN SERVICES DIVISION OF JUVENILE JUSTICE SERVICES POLICY AND PROCEDURE

Policy No.: 05-03 Effective Date: 12/05/03 Revision Date: 08/31/04

Subject: Suicide Prevention

I. Policy Statement

The Division shall identify and establish precautionary measures to prevent suicide.

II. Rationale

National studies have shown that juveniles who are in Juvenile Justice Services are at higher risk of suicide.

III. Definitions

- A. "Suicide awareness" is the recognition of verbal and behavioral cues that may indicate potential suicide.
- B. "Direct-care staff" is employees whom have job responsibilities working directly with juveniles, including intake and control staff.

IV. Procedures

- A. All direct-care staff shall attend and complete the life-safety course for suicide awareness and prevention. Training shall include, but not be limited to, education and review of suicide policy and procedure.
- B. All juveniles coming into the care and custody of Juvenile Justice Services shall be assessed for potential suicide risk. An initial intake screen shall include:
 - 1. observation and interview pertinent to the identification and documentation of the juvenile's potential suicide risk;
 - 2. when possible, contact of parents, previous placements, and other persons or organizations that may have knowledge of the juvenile's past suicidal history, if any, and current potential suicide risk; and
 - 3. a review of available files and other information related to potential suicide risk.
- C. Juveniles identified as a potential suicide risk shall be further assessed to collect more in-depth information utilizing the "At Risk" assessment of suicide or the "SPS" Suicide Predictor Scale.
- D. Staff shall provide continuous monitoring of each juvenile or resident's attitudes, moods, life circumstances, current situational crisis, and other events that may contribute to suicidal ideation.

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- E. When a juvenile or resident has been identified as potentially suicidal, staff shall:
 - 1. place the juvenile in a camera room (when available) for the purpose of continuous monitoring. When a camera room is not available, place the juvenile in a room with another resident (to be designated by staff);
 - 2. visually check the juvenile, in person, at ten- (10) minute intervals or less when the juvenile is in his or her room;
 - 3. verbally communicate with the juvenile or resident to continue assessment of attitudes, mood, and behavior; and
 - 4. document ten-minute checks, significant verbal communications, and behavioral changes.
 - 5. Housing arrangements will not be more restrictive than required to protect the safety of the suicidal resident, staff, and other residents.
 - 6. As much as possible, residents will be encouraged and allowed to participate in regular program activities.
- F. Facility staff may recommend that a resident be removed from suicide watch. If it is the consensus of the staff that the resident meets the criteria listed on the "Suicide Watch Removal" form and they are satisfied the juvenile no longer represent a threat to themselves, the senior staff or supervisor may approve the request and remove the resident from suicide watch. The facility director shall be notified of the removal.
- G. Potential suicidal residents (based on the assessment), and those who have attempted suicide, shall be referred to a trained mental health professional.
- H. Communication of clear and current information about the status of juvenile residents, identified as a potential suicide risk, shall be posted in the Control Center and living facilities and verbally communicated to all staff on duty. Documentation shall be entered into the living facility and Control Center logs.
- I. Notification of facility administrators, outside authorities and family members of potential, attempted or completed suicide shall be the responsibility of the supervisor. The lead counselor shall make notifications, when a supervisor is not on the shift.
- J. The facility director, parent(s)/guardian, family and/or next of kin shall be notified as immediately as possible, following the indications of concern, attempt or completion of suicide. Notification of other outside authorities will be made in accordance with the incident reporting requirements. Law enforcement must be notified in the case of a completed suicide.

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- K. There shall be detailed documentation and reporting of the identification, assessment, referral, monitoring, housing, communication, and notification measures taken for any potential, attempted or completed suicide. The supervisor shall ensure that all documentation is available for referral, review, and future reference and placed in the resident's file.
- L. In the event of a serious suicide attempt or a completed suicide, the Division will review the pertinent information and circumstances of individual cases and the effectiveness of facility staff responses.
- M. This policy shall be reviewed annually to determine its effectiveness and appropriateness.

When a juvenile or resident has been identified as potentially suicidal, staff shall:

V. Continuous Renewal

This policy shall be reviewed three (3) years from its effective date to determine its effectiveness and appropriateness. This policy may be reviewed before that time to reflect substantive change.

This policy has been reviewed by the Board of Juvenile Justice Services, and is approved upon the signature of the Director.

Eldon Money, Chairman Board of Juvenile Justice Services	Date	
Blake D. Chard, Director Division of Juvenile Justice Services	Effective/Revision Date	